## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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02/17/2011 JACOBSON HOLMAN PLLC 400 SEVENTH STREET N.W. SUITE 600 WASHINGTON, DC 20004



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(Depositor's name)	
(Signature)	
(Date)	

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		TTORNEY DOCKET NO.	CONFIRMATION NO.
10/553,877	09/05/2006		Sophie Bassez		P70926USO	1051
TITLE OF INVENTION: DEVICE FOR ASSISTANCE IN THE SELECTION OF A COMPRESSION ORTHOSIS AND IN ADAPTING SAME TO THE MORPHOLOGY OF A LIMB						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/17/2011

nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/17/2011	
EXAN	MINER	ART UNIT	CLASS-SUBCLASS	05/16/2011	SMOHAMM1 00000028	10553877	
PAULS, JOHN A 3686		705-003000	01 FC:1501 02 FC:1504		1510.00 OP		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single registered attorney or a	atent front page, list  3 registered patent attornively, e firm (having as a member gent) and the names of upmeys or agents. If no name printed.	era 2	JACOBSON HOLMAN PLLC  2  3	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

## Laboratoires Innothera

Arcueil 94110, France

Please check the appropriate assignee category or categories (will not b	e printed on the patent): 🔲 Individual 💌 Corporation or other private group entity 🚨 Government
4a. The following fee(s) are submitted:  Size See (1510)  Publication Fee (No small entity discount permitted) (300)  Advance Order - # of Copies	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached. (1810)  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _ 06-1358 (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name William E. Player

Date May 13, 2011

Registration No. 31,409

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